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|---|--|----------------------------|---------------------------------|--------------------------------------|----------------------|---------------------------|-------------|------------------|
| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  |  |                            |                                 | Application Nur                      | mber                 | 0/563,811-Conf. #1910     |             |                  |
| FEE TRANSMITTAL   |  |                            |                                 | Filing Date                          | June 9, 2006         |                           |             |                  |
|   |  |                            |                                 | First Named In                       | ventor               | Hiroaki MATSUMURA         |             |                  |
| For FY 2009   |  |                            |                                 | Examiner Name                        | Examiner Name X. Niu |                           |             |                  |
| Applicant claims small entity status. See 37 CFR 1.27   |  |                            |                                 | Art Unit 2828                        |                      |                           |             |                  |
| TOTAL AMOUNT OF PAYMENT (\$) 1,300.00   |  |                            | Attorney Docket No. 5232-0102PU |                                      |                      | S1                        |             |                  |
| METHOD OF PAYMENT (check all that apply)  |  |                            |                                 |                                      |                      |                           |             |                  |
| Check Credit Card Money Order None Other (please identify):   |  |                            |                                 |                                      |                      |                           |             |                  |
| X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP  |  |                            |                                 |                                      |                      |                           |             |                  |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  |  |                            |                                 |                                      |                      |                           |             |                  |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee  |  |                            |                                 |                                      |                      |                           |             |                  |
| Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  |  |                            |                                 |                                      |                      |                           |             |                  |
| FEE CALCULATION   |  |                            |                                 |                                      |                      |                           |             |                  |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES   |  |                            |                                 |                                      |                      |                           |             |                  |
|   | FI   | ING FEES                   |                                 | ARCH FEES                            |                      | NATION FEES               |             |                  |
| Application Ty  | <u>/pe                                    </u> | Small Enti ) Fee (\$)      | <u>ty</u><br>Fee (\$            | Small Entity ) Fee (\$)              | Fee (\$)             | Small Entity<br>Fee (\$)  | Fees F      | <u>Paid (\$)</u> |
| Utility   | 330  | 165                        | 540                             | 270                                  | 220                  | 110                       |             |                  |
| Design  | 220  | 110                        | 100                             | 50                                   | 140                  | 70                        |             |                  |
| Plant   | 220  | 110                        | 330                             | 165                                  | 170                  | 85                        |             |                  |
| Reissue   | 330  | 165                        | 540                             | 270                                  | 650                  | 325                       |             |                  |
| Provisional   | 220  | 110                        | 0                               | 0                                    | 0                    | 0                         |             |                  |
| 2. EXCESS CLAIM FEES Small Entity   |  |                            |                                 |                                      |                      |                           |             |                  |
| Fee Description Fee (\$)  |  |                            |                                 |                                      |                      |                           |             |                  |
| Each claim over 20 (including Reissues) 52 26   |  |                            |                                 |                                      |                      |                           |             |                  |
| Each independent claim over 3 (including Reissues) 220 110  |  |                            |                                 |                                      |                      |                           |             |                  |
| Multiple dependent claims 390 195   |  |                            |                                 |                                      |                      |                           |             |                  |
| Total Claims  | Extra Claims                                   |                            |                                 |                                      |                      | Multiple Dependent Claims |             |                  |
|   | ber of total claims paid for                   | _ x<br>. if greater than 2 |                                 | WARPS                                | <u>F6</u>            | <u>ee (\$)</u> <u>F</u>   | ee Paid (\$ | 7                |
| Indep. Claims   | Extra Claims                                   | -                          |                                 | ee Paid (\$)                         |                      |                           |             |                  |
|   | 8 or HP =                                      |                            | =                               |                                      |                      |                           |             |                  |
| HP = highest number of independent claims paid for, if greater than 3.  |  |                            |                                 |                                      |                      |                           |             |                  |
| 3. APPLICATION SIZE FEE   |  |                            |                                 |                                      |                      |                           |             |                  |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer   |  |                            |                                 |                                      |                      |                           |             |                  |
| listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |  |                            |                                 |                                      |                      |                           |             |                  |
| Total Sheet   |  | •                          |                                 | dditional 50 or fra                  |                      | of Fee (\$)               | Fee I       | Paid (\$)        |
|   |  |                            |                                 |                                      |                      |                           | =           |                  |
| 100 = /50 = (round <b>up</b> to a whole number) x = =   |  |                            |                                 |                                      |                      |                           |             |                  |
| Non-English Specification \$130 fee (no small entity discount)  |  |                            |                                 |                                      |                      |                           |             |                  |
| Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 810.00 1252 Extension for response within second month 490.00   |  |                            |                                 |                                      |                      |                           |             |                  |
| SUBMITTED BY  |  |                            |                                 |                                      |                      |                           |             |                  |
| Signature   |  |                            |                                 | Registration No.<br>(Attorney/Agent) | 32,868               | Telephone                 | (703) 20    | 5-8000           |
| Name (Print/Type)   | Andrew D. Meikle                               | )                          |                                 | 1                                    |                      | Date                      | April 14    | , 2009           |